

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th St. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BD.

2008 JAN 11 AM 11:08

COMMITTEE NAME (Must be same as on Statement of Organization)

Meeker for City Council
IMPORTANT: Indicate by # type of committee you are reporting for:
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name Gene Meeker Political Party (if applicable) _____
Office Sought ALDERMAN AT LARGE District (if Senate or House) _____

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>13737</u>	
Logged In _____	
Scanned _____	
Computer <u>DM</u>	
Audited _____	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Banner Butler
SIGNATURE OF PERSON FILING REPORT

359-1565
TELEPHONE

10 Jan 2008
DATE SIGNED

I AM FILING A YEAR END - Jan. 19, 2008 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
NOV. 6, 2007
County & Local Committees, enter County in
which Election is held
SCOTT

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 782.83

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

1,995.00

Schedule F: Loans Received total (Attach Schedule F)

250.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 3027.38

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

2734.01

Schedule F: Loan Repayments total (Attach Schedule F)

250.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 43.82

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 0

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 0

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES X NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Meeker for City Council

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTSCHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/28/07	ID# CK#	CASH		\$ 10	<input type="checkbox"/>
10/28/07	ID# CK#	MARY CHAMBERLIN 709 GRAND DAVENPORT IA 52803		100	<input type="checkbox"/>
10/28/07	ID# CK#	MARLEO VOLZ 203 W 3RD DAVENPORT, IA 52801		50	<input type="checkbox"/>
10/28/07	ID# CK#	STEVE NUNTER 2815 E PLEASANT DAVENPORT IA 52803		50	<input type="checkbox"/>
10/28/07	ID# CK#	KENNETH CRACKS 29 MILLCREST DAVENPORT, IA 52803		50	<input type="checkbox"/>
10/29/07	ID# CK#	MARK GOULD 2620 EDGEWILD DR DAVENPORT IA 52807		25	<input type="checkbox"/>
10/29/07	ID# CK#	FRANCES CARROLL 1733 EASTMEER DR DAVENPORT IA 52807		50	<input type="checkbox"/>
10/30/07	ID# CK#	CITIZENS FOR A BETTER DAVENPORT 27215 PLEASANT DAVENPORT IA 52807		1000	<input type="checkbox"/>
10/30/07	ID# CK#	JACK BRUCHMAN 704 RIVER DR BETTENDORF IA 52722		25	<input type="checkbox"/>
10/31/07	ID# CK#	JOE ARDOLD 2547 E BRIDGE WASHINGTON DAVENPORT IA 52803		150	<input type="checkbox"/>
SUB-TOTAL				\$ 1510	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)Meeker For City Council

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 88B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/31/07	ID# CK#	Gene Meeker 2306 WINDSOR CT DAVENPORT IA 52807	CANDIDATE	\$ 50	<input type="checkbox"/>
11/1/07	ID# CK#	Todd Fey 219 RIDGEMOOD AVE DAVENPORT IA 52803		35	<input type="checkbox"/>
11/1/07	ID# CK#	ROBERT SHAW 212 E 32 CT DAVENPORT IA 52807		100	<input type="checkbox"/>
11/3/07	ID# CK#	MIKE WHALEN 2140 ST AUGUSTUS CT BETTENDORF IA 52722		100	<input type="checkbox"/>
11/3/07	ID# CK#	MARK NORDSON 3026 B GREENOAK DR BETTENDORF IA 52722		100	<input type="checkbox"/>
11/5/07	ID# CK#	CHARLES RULH JR 2740 NICHOLS LANE DAVENPORT IA 52803		100	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 485	
TOTAL (if last page of this schedule)				\$ 1995	

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Page 2 of 2
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Meeker For City Council

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/29/07	ID# CK#	US POST OFFICE	Postage	\$ 82
10/31/07	ID# CK#	US POST OFFICE	Postage	82
10/31/07	ID# CK#	RWQC PO Box 601019 CHARLOTTE, NC 28260	TV Advertisement	2035
11/12/07	ID# CK#	LARRY BERGNER 1214 ARLINGTON AVE Davenport IA 52803	Web Design	300
11/23/07	ID# CK#	CU MEDIA 4950 - 38 Ave Moline IL 61265	Cable TV Advertising	150
11/23/07	ID# CK#	DAN FORTES 109 Essex Lane Davenport IA 52803	Food Raising - Food Ex	85
11/30/07	ID# CK#	US BANK	BANK Fee	.01
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 2734.01

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(j).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Meeker For City Council

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ -0-

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT OF LOAN
10/31/07	Gene Meeker 2306 Windsor Ct Davenport Ia 52807	Candidate	\$ 250
TOTAL (PART I)			\$ 250

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT REPAYED
12/31/07	Gene Meeker 2306 Windsor Ct Davenport Ia 52807	Candidate	\$ 250
TOTAL CASH REPAYMENTS (PART II)			\$ 250

From Schedule E - TOTAL LOANS FORGIVEN \$ -

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ -0-

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SCHEDULE

F

(Rev. 07/03)

LOANS
RECEIVED
& REPAYED
☐ CHECK THIS BOX IF
AMENDING FORM